

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000601 (5)

1. Corporation Name

GOLF ORIENTED LEADERSHIP FOUNDATION, INC.



Principal Place of Business

P.O. BOX 491324
FORT LAUDERDALE FL 33349-1324
US

Mailing Address

P.O. BOX 491324
FT. LAUDERDALE FL 33349-1324
US

3. Date Incorporated or Qualified
02/12/1993

3a. Date of Last Report
03/07/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0386998

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EGGELLETON, JOSEPHUS JR
3376 NW 21ST ST
LAUDERDALE LAKES FL 33311

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/O
EGGELLETON, JOSEPHUS JR
3376 NW 21ST ST
LAUDERDALE LAKES FL 33311 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HAGAN, LARRY
3711 NW 109 AVE.
CORAL SPRINGS FL 33065 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
REYNOLDS, DWIGHT
1640 WEST OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33309 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
THOMPSON, GERALD
2633 NE 3RD AVE.
WILTON MANORS FL 33334 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BOSWORTH, GARY
3840 INVERRARY BLVD.
LAUDERHILL FL 33319 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HUTCHINSON, WILLIAM
514 SE 7 STREET
FT. LAUDERDALE FL 33301 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
CHUCK BUTLER
10401 NW 40th PLACE
CORAL SPRINGS, FL 33065 ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
LARRY JAMES
4100 S. HOSPITAL DR.
PLANTATION, FL 33317 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
WINSTON ALEXIS
5975 W. SUNRISE BLVD
SUNRISE, FL 33313 ☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 877, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Josephus EGGELLETON JR. / Josephus Eggelleton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)